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CHAPTER XIII

Morality

587 There is no immorality, as we know it, among the desert tribes. There is, of course, plenty of marrying and giving in marriage, and as I have said, divorce is so easy that a woman often has six or seven husbands in her lifetime, and a man always as many wives as he can
548 afford, provided he confines himself to four at a time. Prostitutes are
837 unknown among the Badawin, and adultery is punishable with death.

572 Friendships between men and women, on the other hand, exist, and are recognised, especially if the parties are of the same tribe and are related, for example my friend Shaikh Thuwairan Abu Sifra of the Mu'aha section of the Mutair, was a friend of Muthi, wife of Falah bin
369 'A'amir, also of the Mu'aha. Every Badawin, of course, is aware that
548 immorality exists in the big towns, and this is one of the main reasons why he despises the townsman.

Unfortunately a Badawin man up from the distant desert sometimes finds his way to the prostitute quarters when he visits towns
● [164] such as Mecca and Madina, Jiddah, and Kuwait. This has resulted in the spread of syphilis and venereal disease among the tribes.

In Wahhabi-land proper (i.e. Sa'udi Arabia, excluding the Hijaz), no prostitute is tolerated even in the towns, let alone among the tribes, but I am told that there is nevertheless a good deal of clandestine immorality.

931 It is curious but true that if you discuss the question of morals with
672 well-informed Najd Badawin, they will always tell you that certain great shaikhly families of the desert, especially in the north, have always had rather loose morals, while certain others stand out for their good morals and generally high tone. For instance, the well-known shaikhly house of Al Sha'alan (Ruwala) as well as that of the Hawaitat, Bani Sakhr (both Trans-Jordan), and Shammar Jarba (Iraq), are all said to be pretty lax where women are concerned, and conversely Al Hadhal (Amarat), the Dushan (Mutair) and the Hamidda ('Utaiba)

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are never washed. The Badawin mother uses *kuhl* or antimony to keep the trouble away, also a concoction resembling red ink watered down, which is smeared all over the infant's eyes. Continual sore eyes often result in the lashes growing inwards, and then only operation by a qualified surgeon is of any use (The American Mission Hospital at Kuwait deals with hundreds of eye cases annually among infants). [See also note at end of this chapter, "Curing Sore Eyes."]

(*b*) *Worms* or snakes (*dáb*, plural: *dibban*) as the Badawin call them, are in most cases the result of drinking impure water. Symptoms are anæmia and fits of giddiness. This disease does not cause the parents much anxiety.

(*c*) *Scabies of head* is fairly common among Badawin children, and sundry concoctions of clarified butter, charcoal, etc., are tried as a cure. A visit to a hospital is the only hope. The scabies is said to go away by itself when the patient reaches fifteen years of age.

(*d*) *Whooping cough* (*Abu Hamaiyir*) is quite common during the spring and autumn months, and usually runs its course.

(*e*) *Smallpox* (*Jidri*).—This is the most dreaded disease among the Badawin, yet even if they are near the towns it is difficult to persuade them to get vaccinated. The Badawin segregates anyone attacked with smallpox and puts the patient in a tent alone and a quarter of a mile distant from other tents. He also inoculates the patient from the serum of another smallpox victim. This more often kills, but also definitely effects cures at times.

(*f*) *Measles* (*Hasbak*).—A common complaint, rarely fatal. A child with measles must only eat a limited amount of certain foods. It must not be allowed to smell any other kind of food. Even a whiff of such "scent" may kill the child, or so its mother believes.

Ordinary stomach-ache in a child is usually treated by branding.

Circumcision sores.—These are sometimes very grave, and are caused by dirt and flies. The Badawin is usually circumcised at seven years and in the month of July, when it is very hot and many flies are about (see Chapter X).

DISEASES OF GROWN-UP MEN AND WOMEN

Apart from the children's diseases, to which grown-ups are equally subject, the following are peculiarly common to adults:

(*a*) Consumption or Phthisis.
(*b*) Syphilis.

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(*c*) Cataract, Tracoma, Conjunctivitis.
(*d*) General stomach disorders.

164 The ravages of the first two diseases are serious among the Badawin of Arabia. (*a*) *Consumption* is primarily due, I think, to malnutrition, to sharing the same coffee cup with others and the prevailing habit of covering the head completely with the quilt or *lahâf* when sleeping at night in winter. The Arab has the further unhealthy habit of sleeping under the same *lahâf* as his wife, each breathing the other's breath throughout the night. This bad custom is universal, and a wife would be sorely wounded if her husband were to sleep on a separate couch or under another *lahâf*.

Another possible cause of consumption may be the quantity of dust and sand the average man and woman breathes during the course of the year, especially during the summer months, when by day and night dust lies heavy over the camps and sandstorms are of almost daily occurrence.

(*b*) *Syphilis*, known as *balash* among the Badawin, and *fringi* (the Franks' disease) among townsmen, is said to have been rare in Arabia some years back, but it is certainly common among the great Mutair, 'Ajman, Dhafir, Shammar, all important tribes of North East and North Central Arabia to-day. Philby talks in one of his books of the rareness of the disease in Najd, which I think was correct some years back. On the other hand, both Dr. Dame and Dr. Mylrea, of the American hospitals in Bahrain and Kuwait, have assured me that from the number of Badawin patients that they now treat for the disease the scourge must be very widespread indeed.

It cannot be doubted that the sea-coast towns have given the disease to Najd proper, and this has been encouraged of late by the large motor traffic between Mecca and Riyadh, for which Bin Sa'ud has been responsible.

There is little doubt too, I think, that the Turks introduced the disease into the province of Hasa prior to 1912, though some of it must have also come from Bahrain.

757 164 The following is the common Badawin method of treating these two diseases.

Consumption is known as *diq, sil, maraudh al khabith*. As soon as a person develops a cough with continuous low fever ſit is curious

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how much more often women and girls seem to get the disease than men), the relatives take the patient and place two straight small brands on the left wrist opposite the thumb like this | |. If this does not bring about an improvement in fifteen days or so, two more brands, similar to the above, are placed on the right wrist. Lastly, if no improvement is seen the bottom of the tongue is similarly branded. This operation is terribly painful, it causes the mouth to swell up, and for days the patient cannot speak at all. After this no more is done for the affected person. If she or he dies, well, it is *maktúb 'alai* (it is written that his time has come).

I have seen many sad cases of apparently hale and hearty lasses, beginning with a slight cough, developing a worse and finally dying within the space of a month. They rarely appear to think they are going to die, and cheerfully offer you coffee from the cups they daily drink from. I recollect the tragic death of Wadha bint Murait and wife of 'Abdullah al Junaifir in 1932 very clearly, and shall never forget the end of that very sweet and attractive young wife. We did all we could for her, but it was no good. A similar and equally distressing case was my wife's 'Ajman girl friend Ghazaiyil, wife of 'Abdullah al Ghalaifus. She left us to die in Hufuf in 1933.

One of the first difficulties these poor folk are up against is that they have not the wherewithal to go on a strictly milk diet, which, I believe, is one of the first essentials when treating phthisis. The poorer Badawin cannot simply afford to buy a couple of milch goats or sheep out of the season, and even in the cold weather they are lucky if they can raise one goat which gives milk.

Syphilis.—While the townsman knows more or less how to treat this disease, and can to-day get neosalvarsan and bismuth treatment if he chooses to go to the various mission hospitals in the coast towns of the Gulf, the unfortunate Badawin for the most part neglects the disease, and passes it on to his wife and children.

An outstanding example of how whole families can be afflicted with the scourge is the case of the Al Shuqair clan of the Al Muhammad branch of the Dushan ruling family of the Mutair. Practically the whole clan has inherited the disease, and other Badawin fight shy of having anything to do with them. One of the leading members of the family, Shaikh Majid al Asgar, though far gone in 1933, was at last

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persuaded to come into Kuwait for a course of treatment. He checked the disease in himself, I believe, but immediately passed it on to his wife and to his son, Mutluq, a fine young lad. Another shaikh, Faisal al Shuqair, came into Kuwait for treatment in 1935. The affliction of Al Jazi's son, Bandar, who is deaf and dumb, can most certainly be traced to the family infection.

According to the Shaikh of Kuwait, who has frequently discussed these questions with me, by far the most dreaded disease of all is smallpox. The appearance of this terrifies the Badawin to an extraordinary degree, and the tent that has contracted the malady is placed far apart from the others, and no one is allowed to go near it or to leave it. Food and water is placed for the occupants by friends some 300 yards off, and the inmates of the tent come and take it. On the other hand, the Badawin seems to have no dread at all of consumption, syphilis or any form of social disease. He seeks no cure unless in an advanced stage of infection.

(*c*) *Cataract of the Eye, Conjunctivitis, Trachoma.*—As in the case of small children, eye diseases form a large part of the Badawin's daily troubles.

Cataract appears to affect the aged to a common degree, and I think may largely be put down to the fine particles of dust which strike the retina; from early childhood he has to endure sandstorms of a type not dreamed of in the West.

The gallant mission doctors deal with a great many of these cases. But unfortunately Persian and other quack doctors in Kuwait and other towns of Arabia do a terrible amount of harm, and many cases of total blindness result from their efforts.

The fact that such quacks are Muslims, and also that they always preach, "No results, no payment", seems to appeal to the Arab.

The disease appears to be worse in the towns than among the nomad population.

Conjunctivitis and *Trachoma.*—These are terribly common especially among the young women of the towns, and the mission doctors at Kuwait and Bahrain do much relief work in this connection.

(*d*) *General Stomach Disorders.*—All varieties of these are common, and may be put down to the Badawin habit of bolting food, and eating enormous quantities when they do get a chance to allay their hunger, say at a shaikhly feast, etc.

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Attitude to Sickness

Drinking muddy water or infected water is another cause, especially among those who go off to the Haj. It is pitiful to see the numbers of men and women who return from the Pilgrimage with dysentery, colitis, and so forth. 757 164

Constipation, of course, is very common.

It must be clearly understood that only the fringe of this interesting subject has been touched upon, but enough, I hope, to show that the most crying of all needs in Arabia to-day, and especially among the Badawin, is good medical attention, hospitals in cities and travelling motor clinics, which can move about among the nomad population and treat them in their homes. The medical branch of the American mission (Dutch Reformed Church) for long established in the Persian Gulf, has done wonders, but much, much more is required.

One of the most interesting features of the Badawin's attitude towards sickness, and especially wounds and sores, is his firm belief that certain pleasant smells or scents have a directly harmful effect on the progress towards recovery. It is in consequence a common sight to see Badawins entering the town of Kuwait, etc., with their nostrils stuffed up with dirty pieces of rag, inserted in the form of "plugs". A sufferer religiously keeps these in his nose until such time as he can escape out of the town again. The "smell of a woman", as he calls it, is a particularly dangerous form of scent to a wound, etc. 751 753

If a man is recovering from smallpox, on the other hand, it is believed that certain human smells, and certain foods, have a highly beneficial effect on the convalescent. He does not, however, know what this food is, or what particular person's odour will help him, so he goes out to receive visits of all the women in the neighbourhood, and is given every possible change of diet, in the fond hope that he will accidentally light on the right thing to effect a cure. This treatment was tried for Nazzal al Rashidi's illness in 1932. 751 757

In my various wanderings among the Badawin, I have always carried a few common medicines, notably of a purgative kind. These have always proved useful. Aspirin too I have found invaluable, as strange though it may seem sun-headaches appear to be fairly common among tribal folk, especially among the women.

Simple Fractures are dealt with fairly satisfactorily by the Badawin. He understands the use of splints, and usually before putting the 752

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APPENDIX XV

THE TRIBAL "WAR CRY" (NAKHWA)

721 The following are a few war cries of the more important Tribes of Arabia.
192 (a) The House or Clan of the Al Sa'ud. "Al Auja", "Ana Akhu Nura", "Ana ibn Mijrin".

(b) The House of Al Subah. "Ana ibn Salim", Ana akhu Miriam".

(c) The Shammar Tribe. "Sanayis", (common to the whole tribe).

(d) The 'Ajman Tribe. "Mu'assa al Haddán, wa ana ibn Al Ajám", "Mafrus al Hadid, wa ana ibn Al Ajám", "Sifar safi al Maut, wa ana Ladhala", "Safi al Maut, wa ana Ladhaila".

(e) The Mutair ('Ilwa) "Ilwa, Hal Raddat".
(Jiblan) "Khayal al Sabha",* "Al Jibili".
(Muwaha) "'Awlad al Muwaihi", "Al Batha",† "Ana ibn Madwash".‡
(Wasil) "'Awlad Wásil", "Ar Rahman wa ana ibn Wásil".
(Bani Abdilla) "'Awlad 'Abád".
(Al Sa'aran) "Al Ashwa",§ "Ana ibn Ali".
(Al Sahabba) "Khayal Sabhat Mushabi".

(f) Awazim. "Arwi", "'Awlad 'Atta" (elided to "Alladatta").

(g) Rashaida. "Al Daaiji", "Murr al Dalála Da'aiji", "Khaiyal Sabhat Da'aiji".

(h) Harb. "Ana ibn 'Ali".

(i) 'Utaiba. "Ahl al 'Atiyah, wa ana ibn Ruq".

(j) Sbei. "Al 'Arfa Sbeiy".

(k) Dhafir. "Al Garwa, Suwaiti", "Sabha Tammah".

* Name of a hill in Najd used as a rendezvous.
† Name of Al Duwish's own camel.
‡ The name of a famous ancestor.
§ Pet name of a she-camel.

Note on (d) above.—The "Nakhwa" common to Ajman and Murra, which may be termed a rallying cry or appeal to fight, is "Ayál Marzuk."

APPENDIX XVI

BLOOD OF THE BIRZAN SECTION OF MUTAIR

A FURTHER NOTE

164 757 826 Shaikh Sabah al Nasir, discussing the question on May 11, 1950, made the following statement:

1. Rabies was unknown in the Hasa, Riyadh, and Rub' al Khali part of Arabia, and appeared to be confined to northern border of Sa'udi Arabia, South Iraq desert and Kuwait.

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2. Three years previously (1947), a pack of wolves, some forty-seven in number, affected with rabies, attacked the inmates of many Harb tents in Ajibba region south-west of Hafar al Batin. The pack bit ninety-two persons. The King sent out troops in cars who destroyed the wolves. Eighty-seven of the bitten persons were given Birzan blood to drink; five did not drink. The eighty-seven survived and are well to this day. The odd five all developed rabies after fifty days and died. Shaikh Sabah gave other instances proving efficacy of Birzan blood if drunk in time by bitten persons.

3. A Birzani retainer who was called up by Shaikh Sabah made the following statement.

(*a*) I am pure bred on my father's and mother's side since 1,500 years ago. I am in demand when a case of rabies occurs among the Badu.

(*b*) When I am called in to give my blood, I cut a small artery in my wrist. The charge for this is 1 Rial. Afterwards the patient who has drunk my blood waits forty days. If all is well then he pays me Rs. 500 or a she-camel costing that amount. For not till then does he know if he has been cured or not.

(*c*) It is very necessary to drink a Birzani's blood within twenty days of being bitten. After that it may be too late, although in rare cases a longer time has been known to elapse and no harm has come to the bitten person.

(*d*) To know if a wolf, dog, fox has rabies, the heart should be cut open and if inside are found white maggots, then undoubtedly the animal has got rabies. If there are no maggots then it is not mad.

(*e*) I have given over three hundred coffee cups of my blood to persons bitten by mad dogs or wolves.

(*f*) A human developing rabies, hates the sight of water, barks and whines. His brain remains fairly clear. Some of those affected cry out "I'm going to bark" or "I'm going to bite", but not all.

(*g*) No one ever recovers if he develops rabies. He is put out of his misery by being taken away behind the tents and a handful of ashes are placed on his head. This causes immediate collapse and death. Why is not known.

(*h*) The Prophet Muhammad who had a great kindness done him by a Birzani, said to him, "I ask God to grant that to you and your descendants be given the power of curing a person bitten by a mad dog, wolf, etc., by drinking your blood". Since that day this power of effecting a cure has been divinely granted. But the blood must be drunk within twenty days, and the donor must be of absolute pure descent on both sides.

The above story proves, among other things, that rabies was known to exist in the Prophet's time.